## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	A MELTABLE INK FOR AN INKJET PRINTER, AND A METHOD OF SELECTING SUCH AN INK									
Fill in Appropriate	the specification of whic forth above and/or the f		reto. If not attached here	to, the applicat	ion is identified by the	attorney docket:	number as set			
Information -	The specification was filed on						as			
For Use Without	United States Application Number						ز			
Specification	and amended on				(if applicable) and/or					
Attached:	the specification was filed on International Application Number				; and was					
	amended on				(lf applicable)					
	amended on									
	amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal									
	Regulations, §1.56.  I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filled by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filled in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.  I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filling date before that of the application on which priority is claimed:									
	Prior Foreign Application(s)			Priority Claimed			Claimed			
Insert Priority	0	• • • • • • • • • • • • • • • • • • • •				•	- ( <u>-</u>			
Information	1021011		<u> </u>	<u>[ulv 5, 2002</u>	/24	⊠				
(if appropriate)	(Number)	(Country)		(Month/Da	y/Year Filed)	Yes	No			
	(Number)	(Country)		(Month/De	y/Year Filed)	☐ Yes	□ No			
	(rantioer)	(Country)		(Montal) Da	ty/ real ruell	Tes 🗆				
	(Number)	(Country)		(Month/Da	y/Year Filed)	Yes	No			
	(Number)	(Country)		(Month/Da	y/Year Filed)	☐ Yes	□ No			
	I hereby claim the benefit under Title 35, United States Code, \$119(e) of any United States provisional applications(s) listed below.									
Insert Provisional		···				:				
Application(s): (if any)	(Application Number)			(Filing Date)		:				
	(Application Number) (Filing Date)						<del></del>			
	All Foreign Applications, if any, for any Palent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:									
	Country Application Number			Date of Filing (Month/Day/Year)						
Insert Requested Information: (if appropriate)							<del></del> .			
ι	I hereby claim the benefit under Title 35, United States Code, \$120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manuer provided by the first paragraph of Title 35, United States Code, \$112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, \$1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
Insert Prior U.S. Application(s): (if any)	(Application Number)	<del></del>	(Filing Date)		(Status - patented, pe	Status - patented, pending, abandoned)				
Page 1 of 2 (Rev. 12/2002)	(Application Number)		(Filing Date)	<del></del>	(Status - patented, pending, abendoned)					

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

all Name of First or Sols inventor: nort Name of inventor → nort Dob This Document is Signed	GIVEN NAME/FAMILY NAME	INTENTOR'S SIGNATURE		DATE*					
nsert Date This Document is Signed	Martinus Antonius KREMERS	1/1/2000-		07-03-03					
nsert Kentdence nsert Objestelstp>	Residence (City, State & Country)		CITIZENSHI	P					
	OTTERSUM, The Netherland	The Netherlands							
nsort Poxt Office Address →	MAILING ADDRESS (Complete Street Address	including City, State & Country)							
	Bredeweg 15 6595 AT OTTERSUM, The Netherlands								
wil Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
	Maurice Hendrikus Hubertinus THIJSSEN	W UA		07-03-03					
	Residence (City, State & Country)		CTTIZENSHI	P					
	DEURNE, The Netherlands	•	The Netherla	nds .					
	MAILING ADDRESS (Complete Street Address including City, State & Country)								
	Appeldijk 2, 5754 CL DEURNE, The Netherlands								
ulj Name of Third Invenior, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
	Berby Marga Gerarda WEITENAUER	(B) ex	)	07-03-03					
	Residence (City, State & Country)		CITIZENSHI	P					
	VENLO, The Netherlands	The Netherlands							
	MAILING ADDRESS (Complete Street Address including City, State & Country)								
	Oscar Wolfersstraat 16, 5913 RM VENLO, The Netherlands								
all Name of Fourth Inventor, if any; see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
	Residence (City, State & Country)		CITIZENSHII	. :					
	MAILING ADDRESS (Complete Street Address including City, State & Country)								
	a man - 4 - 100 millione pareet tombress mirrarith First parie or Colonia 31								
ill Name of FIGA	CRETINAL CONTRACTOR OF THE CON								
in Culcum of Firm forentor, if any see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
	Residence (City, State & Country)		CITIZENSHII	· · · · · · · · · · · · · · · · · · ·					
	MAILING ADDRESS (Complete Street Address i								
ll Nauve of Sixth freehior, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
	Residence (City, State & Country)		CITIZENSHIP						
	MAILING ADDRESS (Complete Street Address in	acluding City, State & Country)		<u></u>					
		· · · · · · · · · · · · · · · · · · ·		<u> </u>					
			_						

Page 2 of 2 (Rev. 12/2002)

\*DATE OF SIGNATURE